

REMARKS

Claims 1-21 were rejected in the Final Office Action dated February 25, 2008. Claims 1, 8, and 15 have been amended as hereinabove set forth. Reconsideration of the present application in view of the above amendments and the following remarks is respectfully requested.

Rejections based on 35 U.S.C. § 102(e)

“A claim is anticipated only if each and every element as set forth in the claim is found, either expressly or inherently described, in a single prior art reference.” *Verdeggal Brothers v. Union Oil Co. of California*, 814 F.2d 628, 631, 2 USPQ 2d 1051, 1053 (Fed. Cir. 1987). “The identical invention must be shown in as complete detail as is contained in the . . . claim.” *Richardson v. Suzuki Motor Co.*, 868 F.2d 1226, 1236, 2 USPQ 2d 1913, 1920 (Fed. Cir. 1989). *See also*, MPEP § 2131.

Claims 1-3, 8-10, and 15-17 have been rejected under 35 U.S.C. 102(e) as being anticipated by U.S. Pre-Grant Publication No. 2002/0038392 to De La Huerga (hereinafter the “De La Huerga reference”). Claims 3, 10, and 17 were canceled in the Amendment filed on June 25, 2008 and, as such, the rejection of claims 3, 10, and 17 is rendered moot. As the De La Huerga reference fails to describe, either expressly or inherently, each and every element as set forth in the rejected claims 1, 2, 8, 9, 15, and 16, Applicants respectfully traverse this rejection, as hereinafter set forth.

Independent claims 1 and 8 relate to a computer-implemented method and a computerized system for reducing the risk of adverse clinical events when administering multiple medications to a patient through a common attachment. Independent claim 15 relates to a computer-readable medium having computer-executable instructions for performing a method.

Each of claims 1, 8, and 15 include associating a first medication with the first attachment; associating a second medication with the first attachment; determining whether the medications are compatible with one another when the first medication and the second medication are administered through the first attachment, if not, generating an alert; receiving orders for the first and second medications, the first medication order being received by displaying a representation of at least a portion of a human body and a first graphical indicia indicative of a location of the first attachment on the patient, and receiving a user selection of the first graphical indicia; and using a computer to display the first medical order and an indication of the location of the first attachment on the patient in a tabular form.

By way of contrast, the De La Huerga reference describes a method for controlling IV medication delivery and monitoring. *See De La Huerga reference, Abstract.* As conceded in the Office Action, the De La Huerga reference “does not explicitly teach the method wherein the first medication order is received by displaying a representation of at least a portion of a human body and a first graphical indicia indicative of the location of the attachment on the patient, and receiving a user selection of the first graphical indicia.” *See Office Action, pg. 5.* Applicants respectfully submit that there is no disclosure in the De La Huerga reference of receiving orders for the first and second medications, as recited in independent claims 1, 8, and 15, as amended herein, wherein the first medication order is received by displaying a *representation of at least a portion of a human body and a first graphical indicia indicative of the location of the attachment on the patient*, and receiving a user selection of the first graphical indicia.

The Office Action indicates that U.S. Pre-Grant Publication Number 2001/0041992 to Lewis, et al. (hereinafter the “Lewis reference”) does teach a “first medication

order . . . received by displaying a representation of at least a portion of a human body and a first graphical indicia indicative of the location of the attachment on the patient, and receiving a user selection of the first graphical indicia.” *See Office Action*, pg.5. It is respectfully submitted, however, that the Lewis reference does not disclose receiving a first medication order by displaying a representation of at least a portion of a *human body* and a *first graphical indicia indicative of the location of the attachment on the patient*, and receiving a user selection of the first graphical indicia, as recited in independent claims 1, 8, and 15, as amended herein.

The Lewis reference, on the other hand, is directed to selecting an anatomic structure to access healthcare information. *See Lewis*, Abstract. In the Lewis reference, “the anatomical user interface . . . can be used to access and review the status of a treatment plan for a patient's medical problem.” *See id.* at ¶[109]. A user can select an anatomic structure from an anatomic model to obtain desired treatment plan information. *See id.* at ¶[110]. “Once the user selects the desired treatment plan, the sequence of appropriate healthcare services are listed in the treatment plan window The user may then order the sequence of healthcare services listed in treatment plan window Alternatively, the user may modify the healthcare services as desired and then order the tailored treatment plan for the patient.” *See id.* at ¶¶[110-111].

While the Lewis reference discusses selecting an anatomic structure to obtain treatment plans of healthcare services, which can be modified and ordered, it is respectfully submitted that the Lewis reference does not describe receiving a first medication order by displaying a representation of at least a portion of a *human body* and a *first graphical indicia indicative of the location of the attachment on the patient*, and receiving a user selection of the first graphical indicia, as recited in independent claims 1, 8, and 15, as amended herein. Rather, the Lewis reference merely discusses presenting a sequence of healthcare services upon the

selection of anatomic structure. This is in stark contrast to a graphical indicia indicative of a location of the attachment on a patient, as recited in independent claims 1, 8, and 15, as amended herein. The Lewis reference does not discuss a graphical indicia that indicates a location of an attachment on a patient.

In addition, it is respectfully submitted that neither the De La Huerga reference nor the Lewis reference discuss using a computer to display the first medical order and an indication of a location of the first attachment on the patient in a tabular form, as recited in independent claims 1, 8, and 15. Although the De La Huerga reference discusses controlling IV medication delivery and monitoring and the Lewis reference discusses selecting an anatomic structure to obtain treatment plans of healthcare services that can be modified and ordered, neither reference discusses using a computer to display the first medical order and an indication of the location of the first attachment on the patient in a tabular form, as recited in independent claims 1, 8, and 15.

Accordingly, it is respectfully submitted that each of the De La Huerga reference and the Lewis reference fails to anticipate independent claims 1, 8, and 15, as amended herein. As such, withdrawal of the 35 U.S.C. § 102(e) rejection of these claims is respectfully requested. Each of independent claims 1, 8, and 15, as amended herein, is believed to be in condition for allowance and such favorable action is requested. As claims 2, 8, 9, 15, and 16 depend from one of independent claims 1, 8, and 15, withdrawal of the 35 U.S.C. § 102(e) rejection of these claims is also requested.

Rejections based on 35 U.S.C. § 103

The basic requirements of a *prima facie* case of obviousness are summarized in MPEP §2143 through §2143.03. In order “[t]o establish a *prima facie* case of obviousness, three

basic criteria must be met. First, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or combine reference teachings. Second, there must be a reasonable expectation of success [in combining the references]. Finally, the prior art reference (or references when combined) must teach or suggest all the claim limitations. The teaching or suggestion to make the claimed combination and the reasonable expectation of success must both be found in the prior art, and not based on applicant's disclosure. *In re Vaeck*, 947 F.2d 488, 20 USPQ2d 1438 (Fed. Cir. 1991)." MPEP § 2143. Further, in establishing a *prima facie* case of obviousness, the initial burden is placed on the Examiner. "To support the conclusion that the claimed invention is directed to obvious subject matter, either the references must expressly or impliedly suggest the claimed invention or the examiner must present a convincing line of reasoning as to why the artisan would have found the claimed invention to have been obvious in light of the teachings of the references. *Ex parte Clapp*, 227 USPQ 972, 973 (Bd. Pat. App. & Inter. 1985)." *Id.* See also MPEP § 706.02(j) and § 2142. Recently, the Supreme Court elaborated, at pages 13-14 of *KSR*, it will be necessary for [the Office] to look at interrelated teachings of multiple [prior art references]; the effects of demands known to the design community or present in the marketplace; and the background knowledge possessed by [one of] ordinary skill in the art, all in order to determine whether there was an apparent reason to combine the known elements in the fashion claimed by the [patent application]." *KSR v. Teleflex*, 127 S. Ct. 1727 (2007).

Claims 4-7, 11-14, and 18-21 have been rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Pre-Grant Publication Number 2002/0038392 to De La Hueraga (hereinafter the "De La Hueraga reference") in view of U.S. Pre-Grant Publication Number

2001/0041992 to Lewis (hereinafter the “Lewis reference”). Claims 4, 11, and 18 have been canceled herein and, as such, the rejection of these claims is rendered moot. Applicants submit that a *prima facie* case of obviousness for the rejection of claims 5-7, 12-14, and 19-21 under § 103(a) has not been established.

As neither the De La Huerga reference nor the Lewis reference, either alone or in combination, teach or suggest all of the claimed features of independent claims 1, 8, and 15, as amended herein, from which claims 5-7, 12-14, and 19-21 depend, Applicants traverse the rejection. As discussed above, both the De La Huerga reference and the Lewis reference fail to teach or suggest all of the claimed features of the rejected independent claims 1, 8, and 15, as amended herein. Claims 1, 8, and 15 are believed to be in condition for allowance and such favorable action is requested. As claims 5-7, 12-14, and 19-21 depend, either directly or indirectly, from one of independent claims 1, 8, and 15, each of these claims is believed to be allowable at least by virtue of its dependency from allowable claims 1, 8, and 15, as amended herein. As such, withdrawal of the 35 U.S.C. § 103 rejection of claims 5-7, 12-14, and 19-21 is respectfully requested.

CONCLUSION

For at least the reasons stated above, claims 1-2, 5-9, 12-16, and 19-21 are now in condition for allowance. Applicants respectfully request withdrawal of the pending rejections and allowance of the claims. If any issues remain that would prevent issuance of this application, the Examiner is urged to contact the undersigned – 816-474-6550 or kfeimster@shb.com (such communication via email is herein expressly granted) – to resolve the same. Although no fees are believed to be required, the Commissioner is hereby authorized to charge any necessary amount to Deposit Account No. 19-2112.

Respectfully submitted,

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